

**CONTRACTORS STATE LICENSE BOARD**

9821 Business Park Drive, Sacramento, CA 95827
Mailing Address: P.O. Box 26000, Sacramento, CA 95826
800.321.CSLB (2752) | www.cslb.ca.gov | CheckTheLicenseFirst.com

STATE OF CALIFORNIA
Governor Gavin Newsom

Certification of Work Experience

Please read the General Information on the previous page before beginning this form.

The qualifying individual from Page 1 of the application must complete the information in Part 1 below; then, the certifier (person certifying the experience) must complete Part 2. The experience must be verifiable through payroll records or similar documents. If additional space is needed to list the trade duties, please attach a separate sheet that must also be signed under the same certification statement contained below in line 9.

Use a separate form for each employer or work setting. If you need additional forms, please make a copy of this blank form or visit CSLB's website to print the form.

Please type or print neatly and legibly in black or dark blue ink – pencil is not acceptable.

FORMS CONTAINING STRIKEOUTS OR MODIFICATIONS MAY NOT BE ACCEPTED. Corrections must be initialed by the certifier.

PART 1 – QUALIFYING INDIVIDUAL (APPLICANT) INFORMATION

The qualifying individual must complete Part 1 in its entirety before the certifier completes Part 2.

1. QUALIFIER'S FULL LEGAL NAME Last First Middle Barre, Joshua, LESSING			
2. BUSINESS NAME OF COMPANY WHERE EXPERIENCE WAS GAINED – OR, IF YOU WERE SELF-EMPLOYED, LEAVE THIS SPACE BLANK AND CHECK THIS BOX <input checked="" type="checkbox"/> (If you checked the box, skip line 3 and go to line 4.)			LICENSE NUMBER OF COMPANY WHERE EXPERIENCE WAS GAINED
3. COMPANY'S BUSINESS STREET ADDRESS Number/Street Only – NO P.O. Boxes		City	State ZIP Code
4. WAS THE EXPERIENCE OBTAINED <u>WORKING ON YOUR OWN PROPERTY</u> AS AN OWNER-BUILDER (see previous page for definition)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If you checked "Yes" above, use the Owner-Builder B-General Building Construction Project Experience form to provide information on completed projects.			

PART 2 – WORK EXPERIENCE AND CERTIFICATION STATEMENT

The certifier must complete Part 2 in its entirety after the qualifying individual (applicant) has completed Part 1.

5. APPLICANT'S JOURNEYMAN-LEVEL OR HIGHER TIME-BASE WORKED IN SPECIFIC TRADE DUTIES (check one): <input checked="" type="checkbox"/> FULL-TIME <input type="checkbox"/> PART-TIME		FOR A TOTAL OF FROM <u>02/12/2013</u> TO <u>11/11/2019</u> = <u>6</u> YEAR(S) and <u>10</u> MONTH(S) <small>(List ONLY journeyman-level or higher experience that was obtained in the applicable classification.)</small> <small>(Do not claim credit for full-time work if applicant worked only part-time or if trade duties in requested classification were only one component of entire job. For example, if applicant worked half-time in specific trade duties for six (6) years, write "3 years" in the space above.)</small>	
6. IN THE SPACE BELOW, LIST ALL SPECIFIC TRADE DUTIES APPLICANT PERFORMED OR SUPERVISED IN THE CLASSIFICATION FOR WHICH THEY ARE APPLYING. PLEASE REFER TO THE DESCRIPTION OF CLASSIFICATIONS DOCUMENT FOR ASSISTANCE. (Do not list office work or individual project names.) Personally conducting repairs and maintenance, supervising repairs and maintenance, managing activities by making technical and administrative decisions, checking jobs for proper workmanship, or direct supervision on job sites.			
7. My business relationship to <u>Joshua LESSING Barre</u> is or was (check all that apply): <small>Name of Qualifying Individual (Applicant)</small> <input type="checkbox"/> Employer <input type="checkbox"/> Contractor (License Number _____) <input type="checkbox"/> Foreman or Supervisor <input type="checkbox"/> Journeyman <input type="checkbox"/> Fellow Employee <input type="checkbox"/> Union Representative <input checked="" type="checkbox"/> Business Associate			
8. CERTIFIER'S STREET ADDRESS Number/Street Only – NO P.O. Boxes		City	State ZIP Code
2116 Wilshire Blvd., Ste 250, Santa Monica, CA 90403			
PHONE NUMBER (310) 849-3656	FAX NUMBER ()	EMAIL ADDRESS guy@wpmla.com	
9. I certify that I have <u>direct knowledge of the work covering the time period outlined above</u> . I certify under penalty of perjury, under the laws of the State of California, that the information stated above is true and correct.			
Date	Signature	Printed Name	

Note: For information on the collection of personal information, please refer to the General Information and Instructions at the beginning of this application package, under the heading "Collection of Personal Information."





CERTIFICATION OF WORK EXPERIENCE

General Information

- This form must be filled in completely in order to document applicant's work experience, or the application will be returned for correction or completion. The qualifying individual on the application (as listed on Page 1 of the application) and certifier (a qualified and responsible person who verifies the experience in the classification for which the applicant is seeking licensure) must type or print neatly and legibly in black or dark blue ink – pencil is not acceptable.
- **FORMS CONTAINING STRIKEOUTS OR MODIFICATIONS MAY NOT BE ACCEPTED.**
- **Corrections on the Certification of Work Experience forms must be initialed by the certifier.**
- **Original signatures are required** – faxed, photocopied, or stamped signatures are not acceptable.
- All qualifying individuals and certifiers must be at least 18 years old.
- All Certification of Work Experience forms must be submitted with the application.
- The Certification of Work Experience form, when filed with an application, becomes the property of CSLB and is kept as a matter of record. **Keep a copy of the completed and signed form for your records** – you may be asked to provide further documentation or testimony to verify your experience. A random three percent (3%) of applications are subject to review, and experience must be verifiable through payroll records and similar documents. CSLB staff may contact the certifier or other parties to verify experience.
- If you have ever served as a qualifier on a license in the classification for which you are now applying, you may not need to complete this form. However, if you are applying for a waiver of the examination pursuant to Business and Professions Code (BPC) sections 7065.1(b) or 7065.1(c), you do need to complete this form. (Please refer to CSLB's website for more information on exam waivers.) **NOTE: If you had a previous application that was denied on the basis of a lack of qualifying work experience, you must complete this form, regardless of whether or not you passed the examination.**
- **Anyone who knowingly procures or offers false or forged documents to be filed, registered, or recorded in any public office in California is guilty of a felony. (Penal Code section 115)**

PART 1 – QUALIFYING INDIVIDUAL (APPLICANT) INFORMATION

- **The qualifying individual (qualifier) must complete Part 1 in its entirety before the certifier completes Part 2.**
- Lines 2 and 3 request the business name of company, license number of company, and company's business street address of the place where your experience was gained, which may or may not have been your employer.

PART 2 – WORK EXPERIENCE AND CERTIFICATION STATEMENT

- **The certifier must complete Part 2 in its entirety after the qualifying individual has completed Part 1.**
- **The qualifying individual must document at least four (4) years of journeyman-level or higher experience in the classification for which they are applying. The experience must have been obtained within the last 10 years.**
- **The qualifying individual's work experience must have been completed at the level of journeyman, foreman, supervising employee, or contractor,** as defined below (*Title 16, California Code of Regulations [T16 CCR] section 825*). Also defined below are "owner-builder" and "self-employed individual."
 - A **"journeyman"** is an experienced worker who is fully qualified (as opposed to a trainee) and is able to perform the trade without supervision, or a person who has completed an apprenticeship program. (*T16 CCR section 825*)
 - A **"foreman"** or **"supervising employee"** is a person who has the knowledge and skills of a journeyman and directly supervises construction projects.
 - A **"contractor"** is an individual who is currently a licensed California contractor, a former licensed California contractor, or an out-of-state licensed contractor. A contractor has the skills necessary to manage the daily activities of a construction business, including field supervision.
 - An **"owner-builder"** (a person who performs B-General Building classification work **solely on their own property**, pursuant to BPC section 7044) or a **"self-employed individual"** must have the knowledge and skills of a journeyman as listed above and the skills necessary to manage the daily activities of a construction business, including field observation. Owner-builders must complete and submit an Owner-Builder B-General Building Construction Project Experience form for each owner-builder project on their own property.
- The Description of Classifications document may be used as a reference only and is available through a link on the Applicants page of CSLB's website.
- **The certifier (a qualified, responsible person who is able to verify the work experience of the qualifier) must complete and date and sign under the certification statement on line 9 at the bottom of the form.** The certifier can be an employer, fellow employee, journeyman, union representative, contractor, business associate, or a client if the applicant is/was self-employed. This form will help CSLB determine whether the qualifier has the experience necessary to become a qualified contractor.
- **The certifier must have direct knowledge of the qualifier's experience during the time period listed.** "Direct knowledge" means personal knowledge of the experience that does not depend on outside information or hearsay. The certifier must be able to certify that the qualifier demonstrated a level of knowledge and skills expected of a journeyman or higher in the classification for which they are applying.
- **Any licensee whose signature appears on a falsified Certification of Work Experience form, or who otherwise certifies false or misleading experience claims submitted by an applicant to obtain a contractor license, will be subject to disciplinary action. (BPC section 7114.1)**

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Date	Signature
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